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06-09-04

# 1654  
41

PTO/SB/21 (05-03)

Approved for use through 04/30/2003. OMB 0651-0031

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

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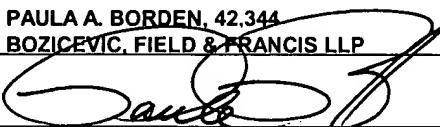
(to be used for all correspondence after initial filing)

		Application Number	09/846,149
		Filing Date	April 30, 2001
		First Named Inventor	SCHWABE, CHRISTIAN <i>JUN 16 2004</i>
		Group Art Unit	1654
		Examiner Name	GUPTA, ANISH <i>TECH CENTER 1600/2900</i>
Total Number of Pages in This Submission		Attorney Docket Number	CONN-015CON

### ENCLOSURES (check all that apply)

<input checked="" type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment / Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input checked="" type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Documents <input type="checkbox"/> Response to Missing Parts/ Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Assignment Papers <i>(for an Application)</i> <input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s)	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group <i>(Appeal Notice, Brief, Reply Brief)</i> <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) <i>(please identify below):</i> 1) Response to Restriction Requirement (2 pgs.) 2) Return Postcard
<input type="text"/> Remarks		

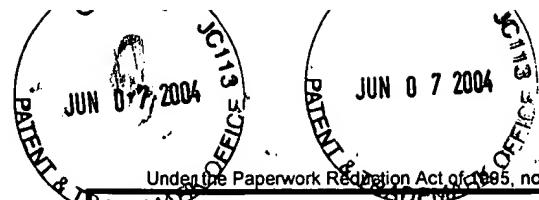
### SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Signing Attorney/Agent (Reg. No.)	PAULA A. BORDEN, 42,344 BOZICEVIC, FIELD & FRANCIS LLP
Signature	
Date	June 7, 2004

EXPRESS MAIL LABEL NO. **FV333997366US**

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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PTO/SB/17 (10-03)

Approved for use through 07/31/2006. OMB 0651-0032  
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# FEE TRANSMITTAL for FY 2004

Effective 10/01/2003. Patent fees are subject to annual revision.

 Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$ 1,005.00)

Complete if Known

Application Number	09/846,149
Filing Date	April 30, 2001
First Named Inventor	SCHWABE, CHRISTIAN
Examiner Name	GUPTA, ANISH
Art Unit	1654
Attorney Docket No.	CONN-015CON

JUN 16 2004

## METHOD OF PAYMENT (check all that apply)

 Check  Credit Card  Money Order  Other  None
 Deposit Account:

Deposit Account Number	50-0815
Deposit Account Name	Bozicevic, Field & Francis LLP

The Director is authorized to: (check all that apply)

 Charge fee(s) indicated below  Credit any overpayments Charge Any Additional Fee(s) Required under 37 C.F.R. 1.17. Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account.

## FEE CALCULATION

## 1. BASIC FILING FEE

Large Entity	Small Entity	Fee	Fee	Fee	Fee	Fee Description
Fee	Fee	Fee	Fee	Code (\$)	Code (\$)	
1001	770	2001	385	Utility filing fee	1051	130
1002	340	2002	170	Design filing fee	2051	65
1003	530	2003	265	Plant filing fee	1052	50
1004	770	2004	385	Reissue filing fee	1053	130
1005	160	2005	80	Provisional filing fee	1812	2,520

## Fee Paid

1251	110
1252	420
1253	950
1254	1,480
1255	2,010
1401	330
1402	330
1403	290

SUBTOTAL (1)

0.00

## 3. ADDITIONAL FEES

## Large Entity Small Entity

Fee	Fee	Fee	Fee	Fee Description
Code (\$)	Code (\$)	Code (\$)	Code (\$)	
1052	50	2052	25	Surcharge – late filing fee or oath
1053	130	1053	130	Non-English specification
1804	920*	1804	920*	For filing a request for <i>ex parte</i> reexamination

Fee Paid

Fee Paid

1805	1,840*	1805	1,840*	Requesting publication of SIR after Examiner action
1251	110	2251	55	Extension for reply within first month
1252	420	2252	210	Extension for reply within second month
1253	950	2253	475	Extension for reply within third month
1254	1,480	2254	740	Extension for reply within fourth month
1255	2,010	2255	1,005	Extension for reply within fifth month
1401	330	2401	165	Notice of Appeal
1402	330	2402	165	Filing a brief in support of an appeal
1403	290	2403	145	Request for oral hearing
1451	1,510	1451	1,510	Petition to institute a public use proceeding

1,005.00

## 2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE

Fee from			Fee Paid
Extra Claims	below	Fee	Fee

Total Claims	-20** =	x	=	1452	110	2452	55	Petition to revive – unavoidable
Indep. Claims	-3** =	x	=	1453	1,330	2453	665	Petition to revive – unintentional
Multiple Dependent		=		1501	1,330	2501	665	Utility issue fee (or reissue)

Fee Description						Fee	Fee	Fee	
Fee	Fee	Fee	Fee	Code (\$)	Code (\$)	Code (\$)	Code (\$)	Code (\$)	
1202	18	2202	9	Claims in excess of 20	8021	40	8021	40	Recording each patent assignment per property (times number of properties)
1201	86	2201	43	Independent claims in excess of 3	1809	770	2809	385	Filing a submission after final rejection (37 CFR § 1.129(a))
1203	290	2203	145	Multiple dependent claim, if not paid	1810	770	2810	385	For each additional invention to be examined (37 CFR § 1.129(b))
1204	86	2204	43	** Reissue independent claims over original patent	1801	770	2801	385	Request for Continued Examination (RCE)
1205	18	2205	9	** Reissue claims in excess of 20 and over original patent	1802	900	1802	900	Request for expedited examination of a design application
SUBTOTAL (2) \$ 0.00									

\*\*or number previously paid, if greater; For Reissues, see above.

Other fee (specify) \_\_\_\_\_

\*Reduced by Basic Filing Fee Paid SUBTOTAL (3) (\$)

1,005.00

## SUBMITTED BY

## Complete (if applicable)

Name (Print/Type)	Paula A. Borden	Registration No. (Attorney/Agent)	42,344	Telephone	(650) 833-7710
Signature				Date	06/07/2004

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